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STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

SD SEC. OF STATE

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER <u>Woke Andes Wave</u>		2. DATE <u>9-28-12</u>
3. FREQUENCY OF ISSUE <u>Weekly</u>	3A. NO. OF ISSUES PUBLISHED ANNUALLY <u>52</u>	3B. ANNUAL SUBSCRIPTION PRICE <u>\$33 In State \$36 Out</u>
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) <u>PO Box 187, Wagner, Charles Mix, SD 57380-0187</u>		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) <u>PO Box 187, Wagner, SD 57380-0187</u>		
6. FULL NAME OF PUBLISHER: <u>Barbra Ann Nichols</u>		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.)		
FULL NAME <u>Taboma Publications LLC</u>		COMPLETE MAILING ADDRESS <u>PO Box 578 Pierre SD 57501</u>
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.)		
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	500	500
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors and counter sales.	180	185
2. Mail Subscription (Paid and or requested)	209	197
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	389	382
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	21	21
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	0	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	410	403
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	90	97
2. Return from News Agents	0	0
G. TOTAL (Sum of E, F1 and F2 - Should equal net press run shown in A)	500	500

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
 I swear that the statements made by me are true, correct, and complete:

Barbra Ann Nichols
 (Signature)

Editor/Publisher
 (Title)

State of South Dakota)

County of _____)

(Seal)

Sworn to before me this 28 day of Sept, 2012

[Signature]
 Notary Public

My commission expires: _____

My commission expires Oct. 13, 2016

Taboma Publications LLC Owner Information

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